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04-16-01

PTO/SB/05 (2/98)

'ed for use through 09/30/2000. OMB 0651-0032

Patent and Tr

'rk Office: U.S. DEPARTMENT OF COMMERCE

## UTILITY PATENT APPLICATION **TRANSMITTAL**

PC10145.4GPR Attorney Docket No. First Named Inventor or Application Identifier Anthony A Fossa Combinations of Corticotropin Releasing Factor Antagonists and **Growth Hormone Secretagogues** 

(Only for new nonprovisional applications under 37C.F.R. §1.53(b)) Express Wall Laber No.									
See MPEP ch	APPLIC		ADDRESS	TO:	Box Pate	t Commissioner for Paten nt Application ton, DC 20231	its		
1. S(s) 2. S(s)	*Fee Transmitt ubmit an original, a Specification (preferred arran - Descriptive - Cross Refer - Statement F - Reference ii - Background - Brief Summ - Brief Descri - Detailed Descri - Claim(s) - Abstract of t  Drawing(s) (35  Oath or Declara  a. Newly b. Copy fr §1.63(d) (for conti	the Disclosure  U.S.C. 11.3)[Total sheet ation [Total pages] executed (original or coportion a prior application (3)	ations d R&D  filed)    124	6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 14.	Nucleotide a (if applicable a b C ACCO Assig 37 C.F. (where Englis Inform State Prelim Return (Shoot *Sman State (PTO Certification (if for	Compensation Displayed in the recipuld be spensation to the recipuld be spensation to the recipuld be spensation to the recipulation of the recipu	Washing mputer Prog mino Acid Se cessary) uter Readab copy (identi ment verifying YING APPI Papers (cover s) Statement s an assigned clation Docum isclosure p) /PTO-144 mendment of Postcard ( pecifically iter stat (2) y of Priority E prity is claime	ton, DC 20231  tram (Appendix)  equence Submission  tle Copy  ical to computer copy)  g identity of above copic  LICATION PARTS  r sheet & document(s))  the Power of A  the  Copies of II  Citations  MPEP 503)  mized)  atement filed in prior applicates still proper and desire  Document(s)	DS Dication,
copy of conside applica	f the oath or de ered to be part tion and is here	of the prior application, from the prior of the disclosure of the aby incorporated by reference.  PPLICATION, check app	er Box 4b, is accompanying rence therein.	FEI IF (	ES, A SMALL ENTI ONE FILED IN A PR	<u>8 14:</u> IN OR TYSTATEN NOR APPLI	RDER TO BE EN MENT IS REQUI ICATION IS REL	8 filed April 13, 2000.  TITLED TO PAY SMALL ENTI RED (37 C.F.R. § 1.27), EXCEI JED UPON (37 C.F.R. § 1.28).  reliminary amendment:	TY PT
	Continuation	Divisional	Continuation	n-in-p	part (CIP)	of pri		n No:/	
Prior application information: Examiner Group/Art Unit:  18. CORRESPONDENCE ADDRESS									
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Name									
Address	Pfizer Inc.		Deint Dec		· · · · · · · · · · · · · · · · · · ·				•
Address	Patent Depar		CT <b>Zip Code</b> 06340						
City Groton		Of America	State		1-(860)-441-49	Zip Code		06340 1-(860)-441-5221	
Country United States  NAME (Print/type)								36,647	
	ature	Gregory P. Raymer		vea	, II IVO. (	Attomey/Agent)  Date		4/12/01	
Sigil	M 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	LA TON				Date		1/13/01	

UTILITY TRANSMITTAL PTO SB 05, 9/99, (1/1)

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FEE TRANSMITTAL						ion Niv		C	ete if Known			
						ion Nui	mber		To be assigned			
						ate			Concurrently herewith			
Patent fees are subject to annual revision on October 1. These are the fees effective October 1,, 2000.					First Na	med In	ventor		Anthony A. Fossa			
Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.					Examine	er Nam	е		To be assigned			
ouieiv	• ,		R. §§ 1.27 and 1		Group/A	rt Unit			To be assigned	<del></del>		
Total Ar	mount of Pay		(\$)1,140.		Attorney		et No.		PC10148AGPR			
					FEE CALCULATION (continued)							
METHOD OF PAYMENT (check one)  1.				3. ADDITI	ONAL F	EES	TEE OX	ECOLATION (continued)				
indicated fees and credit any over			•	Large E	Large Entity Small Entity							
Deposit Account Number	16-1445		<del> </del>		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Descriptio	n	Fee Paid	
Deposit			*									
Account Name	Pfizer Inc.				105	130	205	65	Surcharge – late fee or	oath		
				127	50	227	25	Surcharge—late provisio cover sheet	nal filing fee or			
	e Required Und R. §§ 1.1.6 and			. § 1.1.8 at the Mailing tice of Allowance.	139	130	139	130	Non-English specification	n	-	
	33 1.1.0 and	1.17.	OI ale NO	ace of Allowance.	147	2,520	147	2,520	For filing a request for re	eexamination		
2.	Payment End	closed:			112	920*	112	920*	Requesting publication	of SIR prior to		
Check Money Order Other				113	1,840*	113	1,840*	Examiner action Requesting publication				
		FEE CA	LCULATION		115	110	215	55	Examiner action  Extension for reply within	n first month		
1. BASIC	FILING FEE				116	390	216	195	Extension for reply within month			
Lasas Fa	المسالة	I ==414.			117	890	217	445	Extension for reply withi	n third month		
	ee Fee		Fee Descriptio	n Fee Paid	118	1,390	218	695	Extension for reply withi			
	( <b>\$) Code</b> 710 201	( <b>\$)</b> 355 (	Jtility filing fee	710.00	128	1,890	228	945	Extension for reply withi	n fifth month		
106	320 206	160 [	Design filing fee	,	119	310	219	15ō	Notice of Appeal			
107	490 207	245 F	Plant filing fee		120	310	220	155	Filing a brief in support of	of an appeal		
108	710 208	355 F	Reissue filing fe	ee	121	270	221	135	Request for oral hearing	ı		
114	150 214	75 F	Provisional filing	g fee	138	1,510	138		Petition to institute a put	olic use		
SUBTOTAL (1) (\$) 710.00					140	110	240	55	Petition to revive - unavo			
2. EXTRA CLAIM FEES					141	1,240	241		Petition to revive - uninte			
				e from elow Fee Paid	142	1,240	242	620	Utility issue fee (or reiss	ue)		
Total Claims	35	20**=	15 X	18 = 270.00	143	440	243	220	Design issue fee			
Independent Claims	5 -	3**=	2 X	80 = 160.00	144	600	244	300	Plant issue fee			
Multiple Dep				0 = 0	122	130	122	130	Petitions to the Commiss	sioner		
** or number previously paid, if greater; For Reissues, see below  Large Entity Small Entity				123	50.	123	50	Petitions related to provi				
	ee Fee \$) Code	Fee (\$)	Fee Description	on	126	240	126	240	Submission of Information Statement	on Disclosure		
103	18 203	9 (	Claims in exces	s of 20	581	40	581		Recording each patent a property (times number			
102	80 202	40 li	ndependent cla	ims in excess of 3	146	710	246		Filing a submission after (37 CFR 1.129(a))			
	270 204		, ,	ent claim, if not paid	149	710	249		For each additional inverse examined (37 CFR 1.12)			
109	80 209	40 *	*Reissue indep original patent	endent claims over	Other Fee (specify)				·			
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		SUBTOT	AL (2) (\$)	430.00	*Reduced	by Basic	Filing Fe	ee Paid	SUBTOTAL (	3) (\$)	0	
SUBMITTED BY									Complete (if Applicable)			
Type or Printed Name Gregory P. Raymer							Reg. Number	36,647				
Signature		1. 1/10		Date	1	1/13/	01	Deposit Account	16-1445			
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